

1893.

S^t Olga Hospital for Children.

Moscow (Russia).

ДѢТСКАЯ БОЛЬНИЦА СВ. ОЛЬГИ

ВЪ МОСКВѢ.

Hôpital d'enfants S^{te} Olga

À MOSCOU (RUSSIE).

S^t Olga Kinderhospital

in Moskau (Russland).

МОСКВА.

Типо-литографія Высочайше утвержд. Т-ва И. Н. Кушнеревъ и К^о,
Пименовская улица, собств. домъ.

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Дозволено цензурою. Москва, января 3 дня 1893 г.

St. Olga Hospital for Children

IN MOSCOW.

Chief-physician **L. P. Alexandroff.**

The St. Olga Hospital for Children was erected in the year 1886. The necessary funds were contributed by Count Sergius Orloff-Davidoff in memorial of his mother the late Countess Olga Ivanovna, née Princess Barjatinskaja who died the 19th of September, 1876.

For the foundation of the hospital the count subscribed nearly 680.000 roubles, out of which 480.000 form a Perpetual Fund, the interest of which is employed in the maintenance of the Hospital. The remainder was expended in the erection and installation of the Hospital. All the hospital buildings are erected according to the plans of K. M. Bykoffsky, Member of the Academy of Architecture.

The Hospital is divided into two parts:

- 1) The stationary (for in-patients);
- 2) The ambulance (for visiting patients).

The Stationary division is placed in the main building, which consists of a stone building partly in two floors, partly in one, built on the combined systems of the pavilion and of lateral corridors.

As is evident on the annexed plan the lower floor consists of a central part occupied by the recreation hall (1) for children with an outlet on a covered balcony and the garden and with two wings in which there are large corridors (2) with windows on the North side and wards for patients on the South. The corridors open into large pavilions.

In addition to the principal entrance each wing has its separate entrance, which permits of either wing being isolated from the other.

Both wings are quite symmetrical and of the same dimensions. In each of them there are:

- 1) A Pavilion of 10—12 beds (3) with an area of 22 Russian square fathoms and 7 Arsheens in height which makes 51.26 cubic Russian fathoms (17915.08 c. ft.).

- 2) A room of 3—4 beds of 13 c. R. f. (4).
- 3) 2 rooms of 1—2 beds of 6.4 c. R. f. each (5.6).
- 4) A room for the assistant lady-surgeons (7).
- 5) A bath-room and other necessary offices (8).

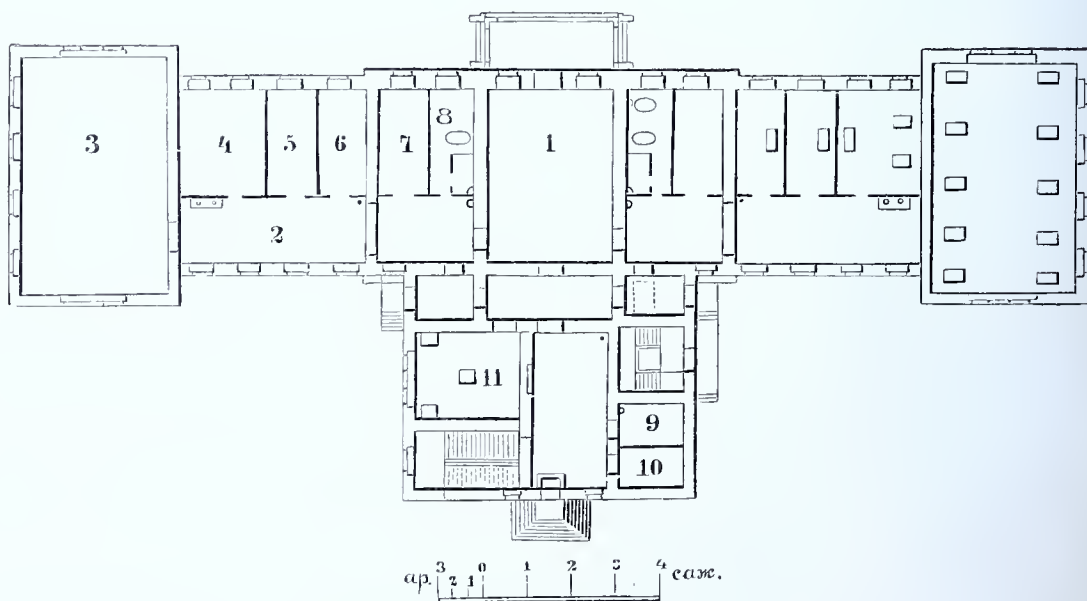
There may therefore easily be placed in each wing from 15—20 beds. In the anterior projection of the building next to the antechamber are placed the operating room (9), Steward's room and the room for consultations (10).

The operating-room (11) with an area of 6.65 s. R. f. and floored with „Metlac“ flag-stones is all painted in white oil colour and is lighted by a window 9 arsheens square. The floor has a slight slope to the centre where there is a drain.

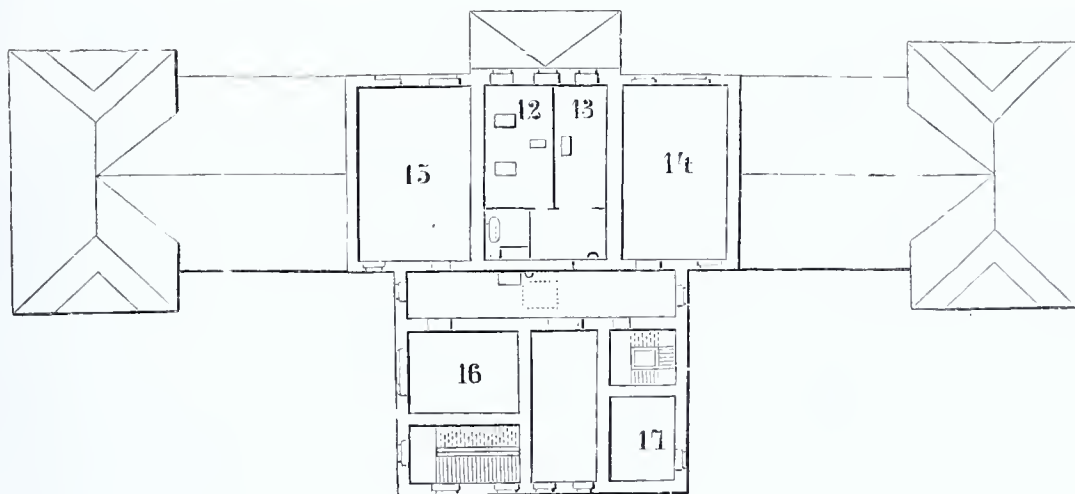
In the operating-room there are two wash-hand basins, an iron operating table with a top of ship glass and covered with thick matting instead of a mattress, a cupboard for instruments, and two marble tables.

The second floor, situated over the middle part of the building and partly over the corridors is occupied: by two spare wards (12.13) with their separate bath-rooms, etc. On the right is the linen-room (14) and on the left the dormitory for the nurses. In the second story of the anterior projection are a dining-room for the nurses (16) and the Matron's-room (17). All the main building is divided into two parts: the surgical occupying the left side and the therapeutic on the right. Each of them contains 15—20 beds.

Plan of the main building of the St. Olga Hospital for Children.



Ground floor.



Upper story.

The heating and ventilation of the main building are arranged on the low-pressure hot-water system. The water is heated in two cylindrical boilers in the basement and conducted through iron tubes along all the exterior walls. Under the windows there are side-batteries, placed outside the axis of the circulation-tubes, for the regulation of the temperature, increasing and decreasing by separate valves the stream of hot water to the batteries.

The system of ventilation is divided into two parts: one serves for raising the fresh external air to the temperature of the room and for its introduction into the different parts of the Hospital; the other for the removal of the spoiled air by means of suction-tubes.

For heating the external air, drawn through brick inlets from the garden, there are in the basement three chambers furnished with side-batteries. There are also damping apparatus for adding moisture to the heated air.

Water is laid on to all parts of the Hospital from the city-aqueduct.

The ambulance section is placed in a separate wooden building part of which is in two floors. In this section there are: a large reception-room for patients, three cabinets for the examination of non-contagious cases and two cabinets for contagious ones with a separate exit; a bath-room and a room for the repose of patients after operations and baths.

On the same floor, but separated from the ambulance section and with a separate entry, is placed the section for doubtful cases, which consists of 4 small rooms with a separate bath-room etc...

On the upper floor of the ambulance building are the apartments for the nurses and Assistant lady-surgeons of the ambulance section.

Under this there is a small dispensing-room. Medicines are given gratuitously to patients on the nomination of a physician. Those who desire

to do so, pay 5 copecks for a prescription. For the preparation of the medicines there exists a separate compounding-room under the management of two assistant lady-surgeons.

The medical staff is composed of the following persons: In the main building the chief-physician and director of the Hospital is also charged with the administration of the surgical section. The senior resident surgeon administers the therapeutic section. The junior house-surgeon is appointed for two years and attends to both sections of the Hospital.

In the ambulance section, 3 physicians are charged with the reception of patients with internal ailments, 1 with surgical and 1 with contagious cases. In summer when applications are more numerous, an additional surgeon is appointed.

The yearly budget of the Hospital amounts to nearly 30.000 Rs. This sum is made up of the interest on the perpetual capital—24.000, of the contributions of the founder and honourary Curator of the Hospital, Count Sergius Orloff-Davidoff and of other benefactors, of receipts from paying patients, and of payments for medicines in the ambulance section.

The number of cases treated in the six years during which the Hospital has existed is shown in the following tables:

I. In the main building:

1887	330	1890	488
1888	359	1891	455
1889	380	1892	454

II. In the ambulance department:

Number of patients.	Number of visits.
1887 10.292	1887 31.361
1888 16.233	1888 43.156
1889 17.772	1889 47.137
1890 21.737	1890 59.299
1891 21.025	1891 55.978
1892 22.219	1892 57.345

On the foundation of the Hospital there were established 30 free beds; by means of contributions since then there have been established 7 free beds more. In addition to these the Hospital has the right to accept not more than 5 paying patients. In the common ward the monthly payment for the complete maintenance and treatment of a child is 20 Roubles and in a separate ward—40 R. p. month.

The Hospital is specially intended for serious illnesses with the exception of acute contagious eruptive diseases etc, such as measles, scarlatina, diphtheria, variola; an experience of six years has shown that in the surgical section of the Hospital there were exclusively received cases necessitating operations, but in the therapeutic section the majority con-

sisted of acute ailments, Of chronic cases these were taken in the diagnosis of which could not be accurately made without prolonged observation.

Girls were accepted up to the age of 14 years, boys to 12 years; infants at the breast, if nursed by their mothers, were taken in with them and placed in a separate ward; in the case of older children the parents were permitted to remain only if a separate room could be given them on payment. But generally speaking the number of paying patients during the six years of the existence of the Hospital has not been great. During that period of time there have been 2466 in-patients and of those only 176 were paying patients, so that in that respect the work of the Hospital has corresponded to the object with which it was erected, viz., to give gratuitous help to the poor population of Moscow.

The Hospital was far from being able to satisfy the demands all who wished to be received as in-patients, although more than once the building had to give shelter to 37 of these. It may here be mentioned that the therapeutic section alone has had every year to refuse admission to 400 children, who were brought to be placed in the Hospital (in that number are not included cases where the statutes of the Hospital do not allow of admission being granted).

The average stay of an in-patient in the hospital varied as follows from year to year: —

1887	29.9 days.	1890	28.9 „
1888	39.5 „	1891	28.3 „
1889	35.7 „	1892	28.1 „

The Therapeutic Section (Dr. Kissel).

Patients suffering from serious and non-contagious diseases are preferably received.

The yearly number of patients in the therapeutic section varied as follows:

1887	192	1890	279
1888	179	1891	238
1889	204	1892	283

In the six years there were in all 1375 patients; among them 390 children with affections of the respiratory organs, 40 of whom (10.3%) died and 350 recovered; there were 212 patients with pneumonia fibrinosa, of whom only 2 died (0.9%) and the remaining 210 recovered. There were 53 patients suffering from pleuritis suppurativa, of whom 19 died and 34 recovered. Operations were performed upon all these patients. There were 40 patients with affections of the heart and its coatings, 9 of whom (22.5%) died. 178 patients were treated for various ailments of the intestinal canal, of whom 159 recovered and 19 (10%) died. 52 of these had dysentery, 9 cases of which were fatal. There were 17 cases

of taenia mediocanellata. 24 children were treated for inflammation of the kidney, 4 of whom succumbed.

There were 10 patients with Peritonitis tuberculosa 5 of whom died. In three cases puncture was had recourse to and in two laparotomia was performed. On one of the last cases after the operation the patient (a girl 12 years of age) got better, but 1½ year after died from amy—loid of the internal organs. 132 patients were treated for typhoid fever, 6 died; the % of mortality therefore=4.5. In three cases intestinal ulcers were found on post-mortem examination and in one case a perforation of the intestine occurred, and general peritonitis had been developed. During the last three years in 100 cases of typhoid fever a system of augmented nourishment was adopted (the patients were not dieted and more nutritious food was frequently prescribed) and of these patients only 2 died—therefore the mortality amounted to 2%. 50 patients had spotted typhus and all recovered. During the last three years antipyresis was not had recourse to in the treatment of typhus and of typhoid.

The Surgical Section (Dr L. P. Alexandroff).

The preference is given to cases requiring operations.

On the year 1887 were received 138 patients and 95 important operations made

"	"	"	1888	"	"	144	"	"	87	"	"	"
"	"	"	1889	"	"	176	"	"	110	"	"	"
"	"	"	1890	"	"	184	"	"	136	"	"	"
"	"	"	1891	"	"	206	"	"	126	"	"	"
"	"	"	1892	"	"	171	"	"	89	"	"	"

The majority of the cases were diseases of the joints and of the bones, which formed nearly 36% of the entire number. Nearly 12% were treated for the stone. In tubercular diseases of the joints the method of treatment most often employed was excision of the joints. In the four years 1887—90 excision of the hip-joint was performed 43 times; 3 died and 40 recovered. In all cases of death the issue of the sickness was not in direct connection with the operation. Of these 40 cases 32 patients completely recovered without fistula, in 8 cases small fistulas remained. The average duration of the treatment of the sore is 40 days. During the same period excision of the knee-joint (arthrectomy) was performed 34 times; 3 died (1 from measles and 2 from tuberculosis miliaris). 31 recovered, 28 of whom left the Hospital completely healed and 3 with small fistulas. The treatment on an average lasted 45 days.

141 cases were operated for stone in the bladder. Lithotrity was performed on 50 of these, of whom 5 died. In 6 cases Median lithotomy was performed and the high operation in 85. 2 of the latter died. In 77 cases the bladder sutured without drains. In 66 of these the suture closed completely, and in 11 it was not so successful.

